

## ISSUE SLIP STAPLE AREA (for additional cross references)

Den

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
O.I.P.E. CLASSIFIER	Bm		66-05-01
FORMALITY REVIEW	MD	579	7/32/01
RESPONSE FORMALITY REVIEW	RPB	1020	9-25-01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	12	
2		13	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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858-7551  
10/16/01

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